Application or Docket Number

| PATENT APPLICATION EE DETERMINATION RECORD 10/500327  Effective October 1, 2003                        |                                 |   |              |                                   |              |                  |            |                     |                        |          |                     |                        |
|--|---------------------------------|---|--------------|-----------------------------------|--------------|------------------|------------|---------------------|------------------------|----------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                                 |   |              |                                   |              |                  |            | SMALL EI            | NTITY                  | OF       | OTHER               |                        |
| TOTAL CLAIMS   |                                 |   | •            | ·                                 |              | ·                |            | RATE                | FEE                    | 1        | RATE                | FEE                    |
| FOR '  |                                 |   | NUMBER FILED |                                   | NUMBER EXTRA |                  |            | BASIÇ FEE           |                        | OR       | BASIC FEE           | ·                      |
| TOTAL CHARGEABLE CLAIMS  |                                 |   | / minus 20=  |                                   |              |                  |            | XS 9=               | ·                      | OR       | X\$18=              |                        |
| INC  | EPENDENT CI                     | LAIMS                                     | minus 3 =    |                                   | •            |                  |            | X43=                |                        | OR       | X86=                | ·                      |
| MULTIPLE DEPENDENT CLAIM PRESEN  |                                 |   |              |                                   |              |                  |            | +145=               | ·                      | OR       | -290=               | ٠.                     |
| * If the difference in column 1 is less than zero, er  |                                 |   |              |                                   | *0" in c     | column 2         | . [        | TOTAL               |                        | OR       | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  |                                 |   |              |                                   |              |                  |            |                     | ·                      | 3 -      | OTHER               | THAN                   |
| (Calumn 1) (Calumn   |                                 |   |              |                                   |              | (Column 3)       |            | SMALL               | NTITY                  | OR       | SMALL (             |                        |
| AMENDMENT A  |                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHI<br>NUME<br>PREVIO<br>PAID F | BER          | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total                           | . 10                                      | Minus        | ÷ 20                              | ) ·          | =                |            | XS,9=               | ,                      | OR       | XS18=               |                        |
|  | Independent                     | • 2                                       | Minus        | 3                                 | )            | - O              | ] [        | X43=                |                        | OR       | X86=                |                        |
|  | FIRST PRESE                     | NTATION OF MU                             | JETIPLE DEF  | ENDENT                            | CLAIM        |                  | ]          | +145=               | ··                     | 1        | +290=               | ·                      |
|  |                                 |   |              |                                   |              |                  | l          | TOTAL               |                        | OR<br>OR | TOTAL               |                        |
|  | (Column 1) (Column 2) (Column 3 |   |              |                                   |              |                  |            | ADDIT. FEE          |                        | OR,      | ADDIT. FEE          |                        |
|  | <u> </u>                        | (Column 1)<br>CLAIMS                      |              | HIGH                              |              | Columnia         | l L        | 1                   | ADDI-                  | ı        |                     | ADDI-                  |
| ENT B  |                                 | REMAINING<br>AFTER<br>AMENOMENT           |              | NUME<br>PREVIO<br>PAID F          | USLY         | PRESENT<br>EXTRA |            | RATE                | TIONAL                 |          | RATE                | TIONAL<br>FEE          |
| NON  | Total                           | • .                                       | Minus        | 44                                | ·<br>        | ε .              |            | X\$ 9=              |                        | OR       | X\$18=              |                        |
| AMENDMENT  | Incependent                     |   | Minus        | ***                               | 01.444       |                  | 4          | X43=                |                        | OR:      | X86=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |   |              |                                   |              | <u> </u>         | <b>ا</b> ل | +145=               |                        | OR       | +290=               | ·                      |
|  |                                 |   |              |                                   |              |                  |            | TOTAL<br>ADDIT. FEE |                        | OR       | TOTAL ADDIT. FEE    |                        |
| (Column 1) (Colum  |                                 |   |              |                                   |              | (Column 3)       |            |                     |                        | •        | •                   |                        |
| AMENDMENT C  |                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>IUSLY | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total                           |   | Minus        | **                                |              | =                | ] [        | X\$ 9=              |                        | ΘR       | X\$18=              |                        |
| AME  | Independent                     | •   | Minus        | ***                               |              | ]=               | 1          | X43=                |                        | OR.      | X86= .              |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |   |              |                                   |              |                  |            | +145=               |                        | OR       | +290=               |                        |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL ADDIT. FEE |                                 |   |              |                                   |              |                  |            |                     |                        |          | TOTAL<br>ADDIT. FEE |                        |

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.